

# BEST AVAILABLE COPY

<b>CLAIMS ONLY</b>							SERIAL NO.	FILING DATE
							APPLICANT(S)	
CLAIMS								
	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT			
	IND.	DEP.	IND.	DEP.	IND.	DEP.		
1							51	
2							52	
3							53	
4							54	
5							55	
6							56	
7							57	
8							58	
9							59	
10							60	
11							61	
12							62	
13							63	
14							64	
15							65	
16							66	
17							67	
18							68	
19							69	
20							70	
21							71	
22	/						72	
23		/					73	
24		/					74	
25		/					75	
26		/					76	
27		/					77	
28		/					78	
29		/					79	
30	/						80	
31		/					81	
32		/					82	
33		/					83	
34		/					84	
35		/					85	
36		/					86	
37		/					87	
38	/						88	
39		/					89	
40							90	
41							91	
42							92	
43							93	
44							94	
45							95	
46							96	
47							97	
48							98	
49							99	
50							100	
TOTAL IND.	3	↓		↓		↓	TOTAL IND.	↓
TOTAL DEP.	15	←		←		←	TOTAL DEP.	←
TOTAL CLAIMS	18						TOTAL CLAIMS	

\* MAY BE USED FOR ADDITIONAL CLAIMS OR ADMENDMENTS